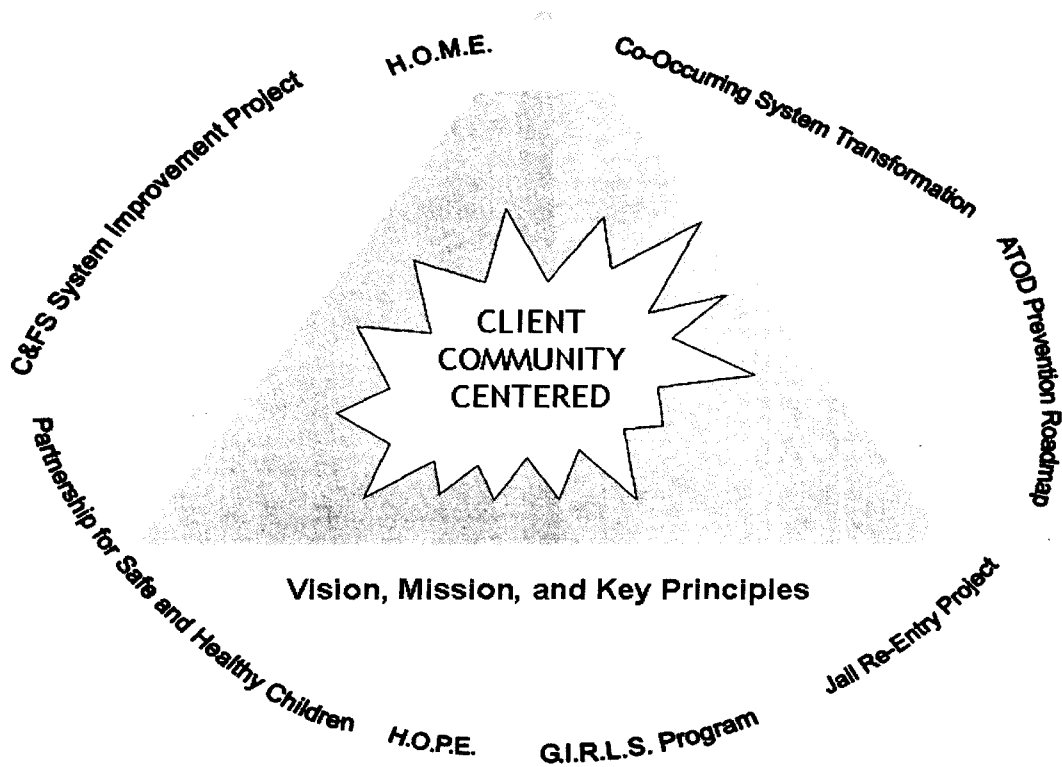


San Mateo County Human Services Agency

Alcohol and Other Drug Services

STRATEGIC DIRECTIONS 2010



**- FINAL DRAFT -
Pending Board of Supervisors Approval**

November 7, 2006

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To the Residents of San Mateo County:

In "Vision 2010", the San Mateo County Board of Supervisors set goals for our county. Included in these goals are ensuring the basic health and safety for all, providing that children grow up healthy in safe and supportive homes and neighborhoods, and guaranteeing that the most vulnerable of our population are assisted in achieving a better quality of life.

Strategic Directions 2010 for Alcohol and Other Drug Services was developed with "Vision 2010" in mind. The plan affirms that successfully addressing the problems related to the use and abuse of alcohol and other drugs in our community is integral to the County's continuing progress toward its Vision.

Scott Morrow, M.D., the Health Officer for the County of San Mateo, stated that the use and abuse of alcohol and other drugs is the number one threat to health in our county. The consequences of such abuse reach wide and deep throughout all of San Mateo County. We are all impacted directly or indirectly – be it from an absent co-worker and lost productivity, a friend or relative who is injured in an accident caused by someone under the influence, or emergency room physicians who are over burdened because those with substance abuse issues disproportionately utilize the health care system.

Our jails are filled with people with substance abuse addiction. Substance abuse figures prominently in domestic violence and a very high percentage of the children taken into protective care by the Juvenile Court have parents with addictions. Many of our residents who are homeless are on the streets due to the persistence of their substance abuse problems.

It is now time to refocus our resources and energies in order to turn back the tide of the negative consequences from substance use and abuse and to mobilize ourselves to restore the lives of so many people.

The need and demand for services far exceeds the available resources in our county. Therefore, we must make sure that we are clear about what we want to achieve, and how best to use the resources we have.

Last June the Board of Supervisors approved the "Roadmap for Alcohol, Tobacco, and Other Drug Prevention" to set a strategy for prevention. Strategic Directions 2010 for Alcohol and Other Drugs will put in motion a concentrated effort of prevention, intervention, treatment, and related activities. As the plan is implemented in cooperation with many community partners, the County of San Mateo will address a major public health issue, impact all of our residents, and continue to make progress toward our "Vision 2010."

Rose Jacobs Gibson
Supervisor 4th District

Richard Gordon
Supervisor 3rd District

OUR VISION

Our community's health and well-being is optimized by successfully addressing problems related to use and abuse of alcohol and other drugs.

OUR MISSION

The County of San Mateo Human Services Agency (HSA), Alcohol and Other Drug Services (AOD) provides leadership and advocacy, supports effective prevention approaches and quality addiction treatment services, and educates the community about substance use and abuse and its related impact on individuals, families, and communities.

KEY PRINCIPLES

- AOD addiction is a chronic, relapsing brain disease
- Interventions are designed to break the cycle of familial addiction
- Prevention sustains healthy people and communities
- Harm-reduction engages people not ready for treatment and can improve other health and social-related outcomes
- Supports and services are comprehensive, continuous and integrated
- Best practices are client and community centered, evidence-based, gender specific, ethnically and culturally responsive

As part of a comprehensive plan that addresses the continuum from prevention through treatment, AOD Strategic Directions 2010 will utilize the "Roadmap for Alcohol, Tobacco and Other Drug Prevention: A Guide for Community Action" to formulate specific policy and actions related to prevention.

METHODOLOGY

The AOD Strategic Plan was informed by numerous sources of information. The three primary sources were information collected from community focus groups, analysis of need and research on best practices, and the guidance and advice of a Strategic Planning Stakeholder group including subcommittees.

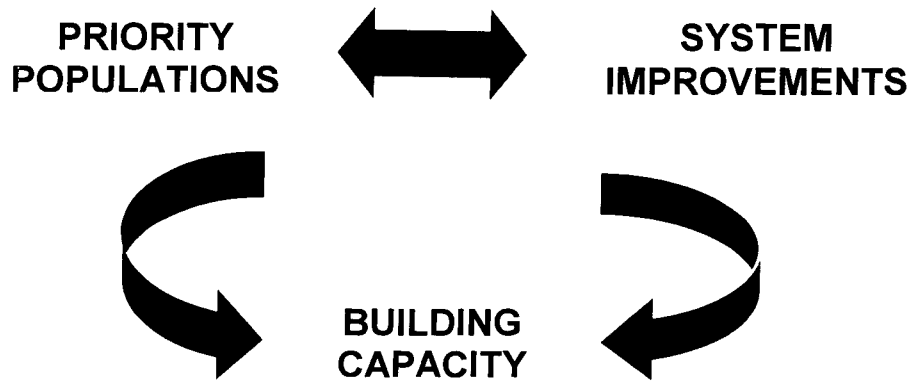
Ten focus groups were held with different sectors of the county, including experts from: Criminal Justice, Front Line Workers from Treatment Providers, Executive Directors of Treatment Providers, Health, Education, Women Clients in AOD Treatment, Children and Family Services (CPS), Youth (girls) in AOD Treatment, and CalWORKS staff.

In addition to these focus groups, Alcohol and Other Drug Services organized a Strategic Planning Stakeholder group responsible for reviewing all information, developing recommendations pertaining to outcomes and strategies, and for recommending approval of the plan to the Board of Supervisors. Members of the Stakeholder group included experts from a range of sectors of the county including: criminal justice, probation, the courts, the sheriff's office, the jail, health, mental health, hospital staff, AOD treatment providers, education, community based organizations, the county manager's office, family resource centers, staff to the Board of Supervisors, disability experts, the Human Services Agency, AOD consultants and consultants from Applied Survey Research (ASR). The Stakeholders met as a whole six times from February through August 2006. In addition, the Stakeholders formed four subcommittees which met to develop outcomes and strategies for four priority populations that emerged from research and analysis of the focus group findings. The four priority population subcommittees were: Families with Young Children under the Age of 5, Youth in the Juvenile Justice and Dependency Systems, the Homeless, and Adults in the Criminal Justice System. Additionally, a Prevention Subcommittee focused on the best prevention strategies for the four priority populations. The Prevention Subcommittee built on the extensive work of "Healthy Communities San Mateo County: Roadmap for Alcohol, Tobacco and other Drug Prevention-A Guide For Community Action."

STRATEGIC DIRECTIONS

We will systematically address achieving outcomes to ameliorate the problems associated with the use and misuse of alcohol and other drugs. We have identified three inter-related strategic directions which we will be addressing concurrently: (1) Priority Populations, (2) System-wide Improvements, and (3) Building Prevention and Treatment Capacity.

Our Plan takes a broader view than solely addressing prevention and treatment to a relatively small number of people. We recognize the need to become more effective and efficient on a system-wide basis in order to achieve the largest impact. Therefore, we will engage our partners in other county departments, community based organizations, the faith based community, schools and the business sector in this endeavor. Our collaborative efforts will identify and implement best practices focusing on all aspects of prevention, early intervention, and treatment strategies.



STRATEGIC DIRECTION 1: PRIORITY POPULATIONS

In San Mateo County we estimate that the publicly funded AOD treatment system currently has resources to provide treatment for only 1 in 5 individuals in need. As a result access to care is significantly restrictive. Therefore, we will prioritize prevention services and primary treatment access to specific populations to receive services under the county system. The four "priority populations" we have identified for primary access to services under this Plan include:

Families with Young Children

The Child Welfare League of America estimates that 40% to 80% of the families involved in the child welfare system have problems with alcohol and/or drugs. We intend to focus on the following populations for services:

- Parents with children five years of age or younger where the child/children have been removed from the home or are at risk of removal from the home;
- Mothers with children born with positive toxicity screens and/or diagnosis of fetal alcohol syndrome;
- Parents in CalWORKS with children 5 years of age and younger; and
- Pregnant women.

Youth

According to the National Survey on Drug Use and Health (NSDUH), 42% of youth aged 12 to 17 who have been in jail or detention centers have used illicit drugs in the past year; this is notably higher than other youth (21%). We therefore have selected the following youth populations to receive services under this Plan:

- Youth in or returning to the community from institutional or group home care; and
- Emancipating youth, specifically youth who are aging out of the foster care system and are ages 16-21.

The Homeless

One-half of homeless adults have histories of alcohol abuse or dependence and one third have histories of drug abuse, according to the Substance Abuse and Mental Health Services Administration (SAMHSA). We will provide services under this Plan to the following homeless populations:

- Custodial parents of minor children; and
- Those with co-occurring disabilities (such as physical, mental and developmental disabilities).

Adults in the Criminal Justice System

According to the U.S. Department of Justice, more than two-thirds of jail inmates abuse or are dependent on alcohol or drugs (68%). We propose to serve the following populations within the adult criminal justice system:

- Custodial parents of children five years of age and younger;
- The homeless; and

Human Challenges

- Recognizing and meeting the complexity of client needs, such as mental illness, poverty, crime homelessness and domestic violence
- Addressing the significant collateral human and society impacts (e.g. health, criminal justice) caused by alcohol and other drug abuse
- Eliminating disparities through a culturally responsive service delivery system

- Those with co-occurring disorders (substance abuse and mental health problems).

Prevention Strategies to Attain Outcomes

In accordance with San Mateo County's Roadmap for Alcohol, Tobacco and Other Drug Prevention (ATOD), our Plan aims to enhance our community-wide approach to prevention by focusing on the following key domains:

- 1) **Individual / Family Connectedness:** Promote and improve connections between individuals, peers, family and communities and strengthen individual assets.
- 2) **Social and Cultural Norms:** Advance social and cultural norms that promote positive and healthy lifestyle choices.
- 3) **Access / Availability:** Reduce the access to/availability of alcohol, tobacco and other drugs to youth and to influence legal access to ATOD in a way that reduces harmful outcomes to users and/or others.
- 4) **Policy, Laws and Enforcement:** Strengthen the enforcement of existing policies and develop new policies that limit youth access to ATOD and promote healthy choices for all.
- 5) **Community Support and Capacity for Prevention:** Build and support the systems and resources necessary to foster and sustain effective ATOD prevention.

Prevention Works!

- For every dollar (\$1) invested in well-designed prevention efforts, \$15 dollars can be saved in future health, social and treatment costs, according to a 1999 study.

Treatment Strategies to Attain Outcomes

To best serve substance abusing individuals and families, our treatment services must align with evidence based and promising practices. We recognize the need for both treatment success and relapse prevention while also building on a harm reduction approach. We will enhance substance abuse treatment by implementing the following (but not exclusive) strategies:

Treatment Works!

- A 2005 UCLA study identified \$7 in societal savings for every \$1 spent on drug abuse treatment.
- Even without considering the direct value to a client's improved health or quality of life, substance abuse treatment is a sound investment.

- 1) **Treatment Continuum on Demand:** Implement a "treatment on demand" system of care that maintains and enhances a full treatment continuum of diverse treatment modalities through improved coordination among treatment providers and which provides necessary ancillary services including child care and transportation.
- 2) **Continuing Care:** Deploy a chronic health management model rather than episodic treatment.
- 3) **Case Management:** Provide case management services to clients to ensure service delivery is coordinated and effective.
- 4) **Relapse Prevention / Intervention:** Enhance relapse prevention treatment interventions throughout treatment, using relapse as an opportunity for client reassessment and reengagement.
- 5) **Trauma Treatment:** Incorporate research-based trauma interventions to support and stabilize clients who have suffered significant trauma.

Outcomes for Clients

Our Plan will demonstrate effective treatment and prevention services by measuring the following client outcomes for the priority populations:

- Clients will maintain recovery and sobriety
- Clients will have stable finances, housing and other basic supports such as stable employment and utilization of primary health care
- Children and youth live in safe, supportive and stable families
- Children and youth are engaged in pro-social activities which enhance resiliency and develop protective assets

STRATEGIC DIRECTION 2: SYSTEM-WIDE IMPROVEMENTS

We identify several issues that have a large scale impact across programs, communities, people, and disciplines and which require a collaborative and comprehensive approach in order to become more effective and efficient on a system-wide basis.

System-wide Issues

- 1) Co-occurring Substance Abuse and Mental Health Disorders
- 2) Methamphetamine Use
- 3) Cultural Responsiveness
- 4) Service Integration
- 5) Service Access
- 6) Data Collection, Analysis and Reporting

Strategies to Attain Outcomes

Over the next three years, we will utilize the following strategies, among others, to address these and other complex, system-wide issues:

- 1) **Roadmap for Alcohol, Tobacco and Other Drug Prevention:** Implement recommendations from the Roadmap for Alcohol, Tobacco and Other Drug Prevention: A Guide for Community Action.
- 2) **Comprehensive, Continuous, Integrated System of Care (CCISC):** Address the needs of individuals and families with co-occurring substance abuse and mental health diagnosis by implementing the CCISC Model.
- 3) **Provider Training:** Enhance prevention and treatment provider education and training to: support implementation of evidence based practice; enhance cultural responsiveness, competency and relevancy; and to improve services and systems.
- 4) **Community Engagement:** Engage diverse communities and stakeholders in the development of Alcohol and Other Drug Services policies and programs.

Outcomes for Clients and the Community

Our Plan will support the following system-wide client and community outcomes:

- Enhanced community health and well being
- Reduced collateral costs in criminal justice, child welfare, health care, and employment
- Decline in multi-generational cycle of familial addiction
- Stronger and more effective partnerships
- Communities across San Mateo County will adopt approaches that prevent AOD misuse

Service Delivery Challenges

- The service system is fragmented, resulting in barriers to collaboration, communication, and delivery.
- Human and financial challenges have placed significant constraints upon the system.
- Reporting client and community outcomes is hindered by current information and information sharing infrastructure.
- Community capacity to provide prevention and treatment services is threatened.

STRATEGIC DIRECTION 3: BUILDING PREVENTION AND TREATMENT CAPACITY

We estimate there are approximately 20,000 youth and adults who at any one time may need to access publicly funded AOD treatment services. We also understand that the need for wide-spread community-based prevention far exceeds our current resources. If we are to improve our response capacity and capability we must increase the quality and quantity of services.

Areas of Focus

1) Resource Development

Quantity: Increase the number of prevention services and supports, early intervention services, residential and outpatient treatment, continuing care, and case management.

Human Resources: Recruit and retain qualified personnel that reflect the diversity of our community.

Facilities: Acquire new facilities; renovate aging and outdated facilities

Technology: Utilize technology to improve services to clients, to better understand communities, and to collect data, measure outcomes and report on our progress

- 2) **Community Capacity:** Support innovation and enhance quality improvement efforts; enhancing our capacity and capability to work with diverse populations and to address health and service disparities
- 3) **Sustainability:** Maximize existing resources and create new resources

Fiscal Challenges

- There is a vast, unmet need for AOD prevention and treatment services.
- Over the course of a lifetime, every person with untreated substance abuse will cost San Mateo County an estimated \$30,000 to \$50,000.
- It is estimated that in three years (FY 09/10), AOD purchasing power will diminish by approximately 8%, resulting in 300 fewer clients receiving services. To maintain our current number of clients, our budget will need to increase by \$2 million.

Strategies

- 1) **Training and Technical Assistance:** Provide ongoing technical assistance and training to prevention and treatment providers to facilitate recruitment and retention of highly qualified staff, in using technology, to enhance performance and quality improvement.
- 2) **Fund Development:** Initiate discussions with stakeholders on mutual responsibilities to secure resources necessary to implement the plan. Identify potential sources of state, federal and foundation funding. Leverage resources/initiatives outside AOD; support providers in grant development; identify other sources of stable, local funding
- 3) **Advocacy:** Sponsor and/or support efforts to develop and/or change policies to remove barriers, reduce costly administrative burdens, create alternative funding sources, develop incentives for improvement, and to facilitate a broad based community engagement in this Plan.

Outcomes

Through these strategies we expect to achieve the following outcomes:

- Use dedicated and discretionary funds more effectively and efficiently
- Increase prevention and treatment access to a larger number and broader range of clients
- Health and human service agencies will strengthen their capacity to assist clients with alcohol and drug addiction

MOVING FORWARD

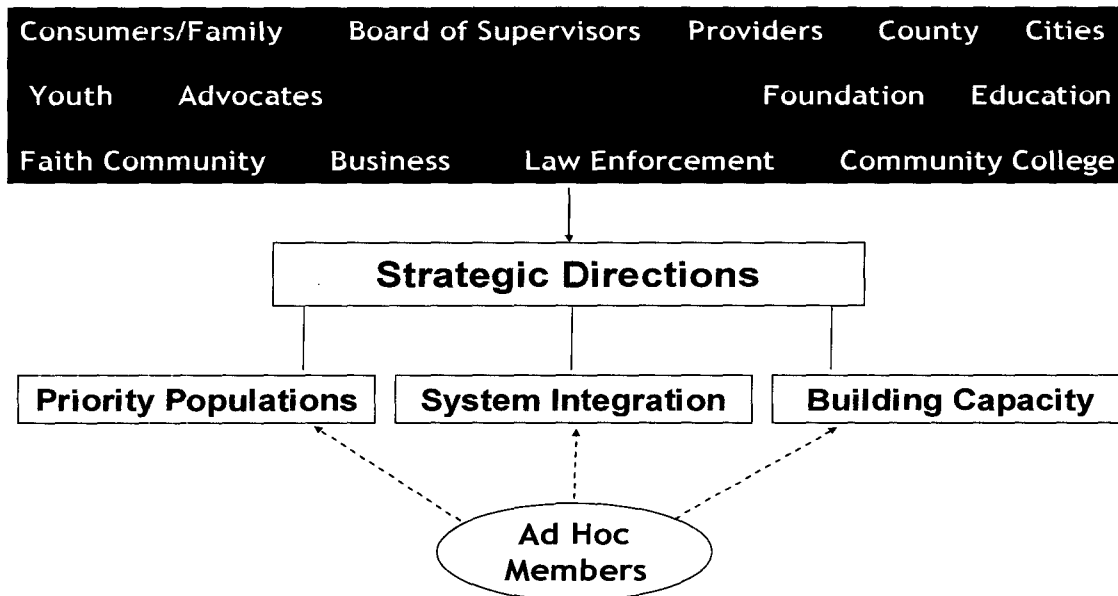
With the adoption of AOD Strategic Directions 2010, important actions are required to build on the strengths of our current system; support progress made in the recent past, and initiate the changes outlined in this Plan.

As the planning process unfolded, it became clearer to the members of our Stakeholder Group that a more formal structure is necessary to implement the level of change that this plan calls for. Our needs assessment identified that there is no organized mechanism for public and private sector organizations, advocates, educators and others to work collaboratively together over time to achieve the outcomes in this Plan. Therefore, an AOD Steering Committee is established with the purpose of improving the effectiveness and efficiency of addressing alcohol and other drug related problems county-wide.

Steering Committee Responsibilities

- Advocate for effective public policy
- Develop budget recommendations to the Board of Supervisors
- Develop and leverage resources
- Remove barriers to services and supports
- Identify standards and accountability measures
- Identify specific plans for each of the three strategic directions
- Submit annual progress report cards and budget

AOD Steering Committee



CHRONOLOGY

History of AOD Strategic Planning in San Mateo County

1989. An Assessment of Alcohol and Drug Problems in San Mateo County. A report offering insight into the extent of alcohol and other drug problems throughout all systems and among multicultural groups.
1991. A Multicultural Five-Year Master Plan for the Reduction of Alcohol and Other Drug Problems in San Mateo County. Describes four major systems charged with finding and implementing AOD solutions (Health, Social Services, Education, and Criminal Justice). Identifies challenges and recommendations associated with nine strategies as the vehicles by which the four systems respond to AOD problems. The nine strategies are: public policy, evaluation, planning, prevention, research, intervention, recovery, treatment, and enforcement.
1992. Human Services Agency established. First Strategic Plan for San Mateo County Human Services released. It established the mission, vision, and core strategic directions to guide future delivery of human services in the County. The major themes were: (1) Implement a pro-active, outcomes oriented, high impact philosophy of service, (2) Extend the boundaries of the human services system, and (3) Deliver services that respond to the self-identified needs of customers.
- 1992-93. AOD Annual Plan. AOD needs identified included services for: Women, pregnant women, women with children; the homeless; ethnic minorities – including-African Americans, Latinos, Asian Pacific Islanders, Native Americans; HIV-Positive Persons with AIDS; gays and lesbians; the dually diagnosed; youth; seniors; and the disabled.
1994. San Mateo County Alcohol and Drug Program: Service System Overview, Needs Analysis, and Funding Plan. Issues identified included: waiting lists, and needs for increased residential services, medically supervised detox program, relapse prevention and aftercare, services for women, pregnant women, and women with children; homelessness; African-American and Latino services; as well as services targeted to Asian/Pacific Islanders, HIV-positive/persons with AIDS; gays and lesbians; dually diagnosed; children and youth; and seniors.
2000. Year 2000 Strategic Plan for Human Services in San Mateo County. Identified three strategic directions for the community: (1) Develop integrated service strategies to support the movement of low-income workers toward self-sufficiency, (2) Support of prevention/early intervention activities in communities where those resources are most needed in order to strengthen families, and (3) Promote provider education initiatives to address the need for human service providers, educators, and health care professionals..
2003. Alcohol and Drug Issues: An Overview of In-Treatment Data and Community Needs Indicators. Alcohol and Drug Services, San Mateo County Human Services Agency. Notes an increase in AOD treatment capacity in FY 1999-

- 2000, especially in outpatient day programs and outpatient treatment. Indicates an increase in the diversity of the population in treatment. Courts and criminal justice agencies were the fastest growing source of referrals.
2004. Strategic Plan for San Mateo County Alcohol and Other Drug Services. Human Services Agency. County of San Mateo. Identified four strategic directions for 2003/2004: (1) Maintain service continuity and ensure a continuum of care, (2) Improve linkages, (3) Promote community education and advocacy, and (4) Improve client/participant outcomes.
2006. AOD Need Assessment in San Mateo County. Planning and Evaluation, San Mateo County Human Services Agency. Demonstrated the large unmet need for publicly funded treatment services in San Mateo County; summarized a variety of National and State studies with findings that demonstrate the cost benefit of investing in effective AOD prevention strategies and treatment services; and identified existing prevention, treatment and community indicators and corresponding trends where available.
2006. San Mateo County's Roadmap for Alcohol, Tobacco and Other Drug Prevention (ATOD). Health Policy, Planning, Promotion, Health Department. County of San Mateo. Identified five priority areas to enhance community-wide approach to prevention: (1) Individual / Family Connectedness, (2) Social and Cultural Norms, (3) Access/Availability, (4) Policy, Laws and Enforcement, and (5) Community Support and Capacity for Prevention.
2006. AOD Strategic Directions 2010 developed and released. Identifies three strategic directions for 2007 through 2010: (1) Priority access to treatment for four priority populations: Families with Young Children, Youth, the Homeless, and Adults in the Criminal Justice System ; (2) Collaborative efforts to improve performance and outcomes of integrated service delivery systems, especially for individuals with co-occurring disorders and those using methamphetamine; and (3) Concerted and effective efforts to fortify our prevention and treatment capacity through resource development, community capacity, and sustainability.

ACKNOWLEDGEMENTS

We would like to thank our stakeholders for their dedication to the Strategic Directions 2010 planning process and their shared commitment to community health and well being. In addition to those stakeholders, other community members joined the subcommittees and added their expertise to the process. Special thanks to all individual focus group participants for your contributions to this plan.

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